1270618

FORM D

UNITED STATES
SECURITIES AND EXCHANGE COMMISSION
Washington, D.C. 20549
FORM D
NOTICE OF SALE OF SECURITIES
PURSUANT TO REGULATION D,
SECTION 4(6), AND/OR



SEC USE ONLY

Prefix Serial

DATE RECEIVED

		<u> </u>	
Name of Offering () check if this is an am Stock Option Grant and Underlying Commo		change.)	
Filing Under (Check box(es) that apply):	Rule 504 Rule 505	Rule 506 Section 4(6)	PROCESSE
Type of Filing: New Filing Am	endment		-10V 1 9 2003
	A. BASIC IDENTIFICATION DAT	ΓΑ	MA TO 5002
1. Enter the information requested about the iss	uer		THOMSON
Name of Issuer (check if this is an amer	ndment and name has changed, and indicate ch	nange.)	FINANCIAL
Address of Executive Offices 6660 N.W. Marine Drive, Vancouver, British	(Number and Street, City, State, Zip C Columbia V6T 1X2 CANADA	Telephone Number (Include (604) 225-2251	ding Area Code)
Address of Principal Business Operations (if different from Executive Offices)	(Number and Street, City, State, Zip C	Code) Telephone Number (Included)	ding Area Code)
Brief Description of Business			
Development and marketing of immune resp	onse pharmaceuticals		
Type of Business Organization		r	
corporation	limited partnership, already formed	other (please s	pecify):
business trust	limited partnership, to be formed		
Actual or Estimated Date of Incorporation or Or	ganization: Month Year 05 01	Actual	Estimated
Jurisdiction of Incorporation or Organization:	(Enter two-letter U.S. Postal Service Abbrev CN for Canada; FN for other foreign jurisdic	<u></u>	N

UNIFORM LIMITED OFFERING EXEMPTION

GENERAL INSTRUCTIONS

Federal: Who Must File: All issuers making an offering of securities in reliance on an exemption under Regulation D or Section 4(6), 17 CFR 230.501 et seq. or 15 U.S.C. 77d(6).

When To File: A notice must be filed no later than 15 days after the first sale of securities in the offering. A notice is deemed filed with the U.S. Securities and Exchange Commission (SEC) on the earlier of the date it is received by the SEC at the address given below or, if received at that address after the date on which it is due, on the date it was mailed by United States registered or certified mail to that address.

Where to File: U.S. Securities and Exchange Commission, 450 Fifth Street, N.W., Washington, D.C. 20549.

Copies Required: Five (5) copies of this notice must be filed with the SEC, one of which must be manually signed. Any copies not manually signed must be photocopies of the manually signed copy or bear typed or printed signatures.

Information Required: A new filing must contain all information requested. Amendments need only report the name of the issuer and offering, any changes thereto, the information requested in Part C, and any material changes from the information previously supplied in Parts A and B. Part E and the Appendix need not be filed with the SEC.

Filing Fee: There is no federal filing fee.

State: This notice shall be used to indicate reliance on the Uniform Limited Offering Exemption (ULOE) for sales of securities in those states that have adopted ULOE and that have adopted this form. Issuers relying on ULOE must file a separate notice with the Securities Administrator in each state where sales are to be, or have been made. If a state requires the payment of a fee as a precondition to the claim for the exemption, a fee in the proper amount shall accompany this form. This notice shall be filed in the appropriate states in accordance with state law. The Appendix to the notice constitutes a part of this notice and must be completed.

Failure to file notice in the appropriate states will not result in a loss of the federal exemption. Conversely, failure to file the appropriate federal notice will not result in a loss of an available state exemption unless such exemption is predicated on the filing of a federal notice.

	,	A. BASIC IDE	ENTIFICATION DATA		
2. Enter the information	requested for the fo	llowing:			
 Each promoter of 	of the issuer, if the is	suer has been organized w	ithin the past five years;		
 Each beneficial securities of the 		power to vote or dispos	se, or direct the vote or	disposition of, 1	0% or more of a class of equity
• Each executive	officer and director	of corporate issuers and of	corporate general and mana	iging partners of p	partnership issuers; and
 Each general and 	d managing partner	of partnership issuers.			
Check Box(es) that Appl	y: Promoter	Beneficial Owner	Executive Officer	Director	General and/or Managing Partner
Full Name (Last name fin Bacha, Jeffery A.	st, if individual)				
		Street, City, State, Zip Coritish Columbia V6J 2J1			
Check Box(es) that Appl	y: Promoter	Beneficial Owner	Executive Officer	Director	General and/or Managing Partner
Full Name (Last name fir Finlay, B. Brent	st, if individual)		A A A A A A A A A A A A A A A A A A A		
		Street, City, State, Zip Columbia V7C 1X7 CANA			
Check Box(es) that Appl	y: Promoter	Beneficial Owner	Executive Officer	Director	General and/or Managing Partner
Full Name (Last name fit Hancock, Robert E.W.	st, if individual)				
Business or Residence A 3505 West 32 nd Avenue	ddress (Number and Vancouver, Britis	Street, City, State, Zip Co h Columbia V6S 1Z1 Ca	de) ANADA		
Check Box(es) that Appl	y: Promoter	Beneficial Owner	Executive Officer	Director	General and/or Managing Partner
Full Name (Last name fin Livingstone, Angus	st, if individual)				
		l Street, City, State, Zip Co h Columbia V6K 2Y2 C.			
Check Box(es) that Appl	y: Promoter	Beneficial Owner	Executive Officer	Director	General and/or Managing Partner
Full Name (Last name fin Rix, Donald B.	st, if individual)				
		l Street, City, State, Zip Co ch Columbia V5G 1K5 C			
Check Box(es) that Appl	y: Promoter	Beneficial Owner	Executive Officer	Director	General and/or Managing Partner
Full Name (Last name fi Babiuk, Lorne	rst, if individual)				
Business or Residence A 245 East Place, Saskato		Street, City, State, Zip Co S7J 2Y1 CANADA	de)		
Check Box(es) that Appl	y: Promoter	Beneficial Owner	Executive Officer	Director	General and/or Managing Partner
Full Name (Last name fit University of British Co					
Business or Residence A 2075 Wesbrook Mall, V	*	l Street, City, State, Zip Co Columbia V6T 1Z1	de)		

			_	В. 1	NFORMA:	TION ABO	UT OFFER	ING				
1 Has th	e issuer sold	or does th	e issuer inte	nd to sell to	non-accred	ited investor	rs in this off	ering?			Yes	No
1. 1145 til	10 133461 3010	•		ŕ				cilig.		***************************************		\boxtimes
2 11/hat	io tha mainima				Column 2, if	-					¢ NI//	
Z. What	is the minim	um mvesim	ent that will	i de acceptei	a nom any n	ildividuai?	*********	***************************************			<u>\$ N/A</u> Yes	No
3. Does t	the offering	permit joint	ownership (of a single u	nit? .			••••••		•••••		\boxtimes
simila associ dealer for tha	the informat r remunerati ated person . If more that at broker or of e (Last name	on for solici or agent of a an five (5) p lealer only.	tation of pu a broker or o ersons to be *NO O	rchasers in dealer register listed are a	connection vered with the	vith sales of e SEC and/o rsons of suc	securities ir r with a stat	the offering e or states, l	g. If a personist the name	n to be listed of the broke	d is an er or	
Business	or Residence	Address (N	Jumber and	Street, City,	, State, Zip (Code)						
Name of A	Associated B	roker or De	aler	_		<u></u>			<u></u>			
States in V	Which Perso	n Listed Ha	Solicited o	r Intends to	Solicit Purc	hasers						
(Check "A	All States" or	check indi	vidual States	s)							☐ All	States
[AL]	[AK]	[AZ]	[AR]	[CA]	[CO]	[CT]	[DE]	[DC]	[FL]	[GA]	[HI]	[ID]
[IL] [MT]	[IN] [NE]	[IA] [NV]	[KS] [NH]	[KY] [NJ]	[LA] [NM]	[ME] [NY]	[MD] [NC]	[MA] [ND]	[MI] [OH]	[MN] [OK]	[MS] [OR]	[MO] [PA]
[RI]	[SC]	[SD]	[TN]	[TX]	[UT]	[VT]	[VA]	[WA]	[WV]	[WI]	[WY]	[PR]
Full Name	e (Last name	first, if ind	vidual)									
Business	or Residence	Address (N	lumber and	Street, City,	, State, Zip (Code)						
Name of A	Associated B	broker or De	aler									
States in V	Which Perso	n Listed Ha	Solicited c	r Intends to	Solicit Purc	hasers						
(Check "A	All States" or	check indi	vidual State:	s)							A11	States
[AL]	[AK]	[AZ]	[AR]	[CA]	[CO]	[CT]	[DE]	[DC]	[FL]	[GA]	[HI]	[ID]
[IL] [MT]	[IN] [NE]	[IA] [NV]	[KS] [NH]	[KY] [NJ]	[LA] [NM]	[ME] [NY]	[MD] [NC]	[MA] [ND]	[MI] [OH]	[MN] [OK]	[MS] [OR]	[MO] [PA]
[RI]	[SC]	[SD]	[TN]	[TX]	IUTI	[VT]	[VA]	[WA]	[WV]	[WI]	[WY]	[PR]

(Use blank sheet, or copy and use additional copies of this sheet, as necessary.)

_	C. OFFERING PRICE, NUMBER OF INVESTORS, EXPEN	ISES AND USE OF	PROC	EED	S
l.	Enter the aggregate price of securities included in this offering and the total amount "0" if answer is "none" or "zero." If the transaction is an exchange offering, checindicate in the columns below the amounts of the securities offered for exchange and	ck this box 🔲 and			
	Type of Security	Aggregate Offering Price		Amo	ount Already Sold
	Debt	\$		\$	
	Equity	\$30,000 CDN(1)	- -	\$	0
	Common Preferred				
	Convertible Securities (including warrants) Stock Options	\$(2)		\$	(2)
	Partnership Interests	\$		\$	
	Other (Specify)	\$		\$	
	Total	\$ 30,000 CDN		\$ \$	0
	Answer also in Appendix, Column 3, if filing under ULOE.	<u> </u>		<u> </u>	
	Enter the number of accredited and non-accredited investors who have purchased offering and the aggregate dollar amounts of their purchases. For offerings under Runumber of persons who have purchased securities and the aggregate dollar amounts on the total lines. Enter "0" if answer is "none" or "zero."	le 504, indicate the		A	Aggregate
		Number Investors		Do	llar Amount Purchases
	Accredited Investors	1		\$	0
	Non-accredited Investors	0		\$	0
	Total (for filings under Rule 504 only)			\$	
	Answer also in Appendix, Column 4, if filing under ULOE.				
٠.	If this filing is for an offering under Rule 504 or 505, enter the information request sold by the issuer, to date, in offerings of the types indicated, in the twelve (12) mon sale of securities in this offering. Classify securities by type listed in Part C - Question	ths prior to the first		Dol	llar Amount
	Type of offering	Security			Sold
	Rule 505			\$	
	Regulation A			\$	
	Rule 504			\$	
	Total			\$	
١.	a. Furnish a statement of all expenses in connection with the issuance and distribution in this offering. Exclude amounts relating solely to organization expenses of information may be given as subject to future contingencies. If the amount of an known, furnish an estimate and check the box to the left of the estimate.	the issuer. The			
	Transfer Agent's Fees			_\$_	
	Printing and Engraving Costs			\$	
	Legal Fees		\boxtimes	<u>\$ 2,</u>	000 CDN
	Accounting Fees			\$	
	Engineering Fees			\$	
	Sales Commissions (specify finders' fees separately)			\$	
	Other Expenses (identify)			\$	
	Total		\boxtimes	\$ 2,	000 CDN

Exercise price receivable upon exercise of stock options.
 Options to purchase common shares issued for no cash consideration.

	b. Enter the difference between the aggregate offering price given in re Question I and total expenses furnished in response to Part C - Question 4 is the "adjusted gross proceeds to the issuer."	.a. This dif	ferenc	e		5 28,000 CDN
5.	Indicate below the amount of the adjusted gross proceeds to the issuer used for each of the purposes shown. If the amount for any purpose is no estimate and check the box to the left of the estimate. The total of payment the adjusted gross proceeds to the issuer set forth in response to Part C - Qu	ot known, fu nts listed m	ırnish ust eq	an ual		
				Payments to Officers, Directors, & Affiliates		Payments To Others
	Salaries and fees			S		\$
	Purchase of real estate			<u> </u>	. 🖳	\$
Purchase, rental or leasing and installation of machinery and equipment				<u> </u>	. 🖳	\$
	Construction or leasing of plant buildings and facilities			S		\$
	Acquisition of other businesses (including the value of securities investing offering that may be used in exchange for the assets or securities another issuer pursuant to a merger)	s of			П	\$
	Repayment of indebtedness		$\exists $		·	\$
	Working capital				· 🗖	\$ 28,000 CDN
	Other (specify):	.,,,,			·	\$
	Column Totals	-				\$ 28,000 CDN
	Total Payments Listed (column totals added)			\boxtimes	. <u> </u>	,000 CDN
	·				• - •	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,
	D. FEDERAL SIG	NATURE				
sign	issuer has duly caused this notice to be signed by the undersigned duly at ature constitutes an undertaking by the issuer to furnish to the U.S. Secur rmation furnished by the issuer to any non-accredited investor pursuant to p	ities and Ex	chang	ge Commission,		
	er (Print or Type) Signature					Date
nin	nex Pharmaceuticals Inc.					November / 7, 200
T	ne of Signer (Print or Type) Title of Signer (Print	ot Type)				
Varr		fficer and I) wasid	ent		